

Addendum to First Steps Policy & Procedure Manual  
Relates to: II Point of Entry – 911 KAR 2:120 Section 1(9)(b)  
June 6, 2005 (rev)

**Policy XI:** *Service Coordinators shall refer a child to the Record Review Team when they are requesting an Intensive Level Evaluation or Eligibility Determination.*

**Procedure:**

**I. Intensive Level Evaluation Request:**

1. To request an Intensive Level Evaluation, the Service Coordinator shall work with the family and other providers to complete the First Steps Request For Intensive Level Evaluation Record Review Form (Form 16) which replaces the cover letter as stated in 911 KAR 2:120 Section 1(9)(b)a; and
2. Attach the following to the Form:
  - a. Primary Level Evaluation Report;
  - b. Available Assessment Reports;
  - c. Available IFSPs and Amendments;
  - d. Most recent progress reports. Reports older than three (3) months shall include an addendum reflecting current progress;
  - e. Therapeutic staff notes from the previous two months;
  - f. If requesting a record review for a child who is receiving speech Therapy, a hearing evaluation performed by an Audiologist within six (6) months of the request.
  - g. If available, birth records, if neonatal or prenatal complications occurred;
  - h. If available, general pediatric records from the primary pediatrician;
  - i. If available, medical records from hospitalizations; and
  - j. If available, records from medical subspecialty consultants, such as neurology, orthopedic, gastroenterology or ophthalmology.
3. Send the Form and the attached information to: Weisskopf Child Evaluation Center, University of Louisville - HSC, Attn: Theresa James/Record Review Committee, 571 South Floyd Street, Suite 100, Louisville, KY 40202, OR in emergency cases by fax to (502) 852-0434.
4. Send the required information to arrive by the close of business on Mondays. Records that are complete with all the above information will be reviewed at the Record Review Meeting that Friday.
5. Receive a written response with final decision by the following Friday.
6. If the Record Review Team recommends an Intensive Level Evaluation be done, then the Service Coordinator must notify the family and have the family choose the Intensive Level Evaluator from the approved provider list for Intensive Level Evaluations. The Record Review Team will not make those appointments for the child and family.

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**II. Eligibility Determination Requests:**

1. To request for eligibility determination, the Service Coordinator shall work with the family and other providers to complete the First Steps Eligibility Determination Record Review Form (Form 17) which replaces the cover letter as stated in 911 KAR 2:120 Section 1(9)(b)a; and
2. Attach the following to the Form:
  - a. Primary Level Evaluation Report;
  - b. Available Assessment Reports;
  - c. If requesting a record review for a child who is receiving speech Therapy, a hearing evaluation performed by an Audiologist within six (6) months of the request.
  - d. If available, birth records, if neonatal or prenatal complications occurred;
  - e. If available, general pediatric records from the primary pediatrician;
  - f. If available, medical records from hospitalizations; and
  - g. If available, records from medical subspecialty consultants, such as neurology, orthopedic, gastroenterology or ophthalmology.
3. Send the Form and the attached information to: Weisskopf Child Evaluation Center, University of Louisville - HSC, Attn: Theresa James/Record Review Committee, 571 South Floyd Street, Suite 100, Louisville, KY 40202, OR in emergency cases by fax to (502) 852-0434.
4. Send the required information to arrive by the close of business on Mondays. Records that are complete with all the above information will be reviewed at the Record Review Meeting that Friday.
5. Receive a written response with final decision by the following Friday.

**III. To have the Record Review Decision Reconsidered:**

1. Write or Fax to the Part C Coordinator (First Steps Part C Coordinator; DPH/Division of Adult and Child Health Improvements; 275 East Main St.; Frankfort, KY 40621) (fax 502-564-8389) a statement of specifically what services are being requested, the reason for reconsideration, any additional information justifying the reconsideration, and a copy of the Record Review Report. Include in the statement the fax or mailing address where to send the written decision.
2. The Department for Public Health will have a 3 person team review the request, consult with the Record Review Team and send a written decision to the identified person within five (5) working days of the receipt of the request for reconsideration.
3. If the IFSP team still disagrees with the written reconsideration decision, then the IFSP team shall have an IFSP meeting to determine the level of service needed and that payment for the service shall be authorized for

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the duration of the current IFSP; and the IFSP Team shall request to have the Part C Coordinator or their designee as a member of the IFSP team, and a representative from the Record Review Team (at least by phone) in attendance.

4. In order to request the Part C Coordinator and the Record Review Team representative to attend the IFSP meeting call 502-564-3756, ext. 3763.